

COVER PAGE

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NAME OF FILER (LAST)

(FIRST)

(MIDDLE)

Norman

Bryan

2018 MAR -1 PM 1:39

Bryan Norman Wells

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

State of California Natural Resources Agency

Division, Board, Department, District, if applicable

Your Position

Division of oil Gas and Geothermal Resources

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: _____

Position:

Associate Oil + Gas Engineer

2. Jurisdiction of Office (Check at least one box)

☒ State☐ Judge or Court Commissioner (Statewide Jurisdiction)☐ Multi-County _____☐ County of _____☐ City of _____☐ Other _____

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2017, through December 31, 2017.

-or-

The period covered is ____/____/____, through December 31, 2017.

☐ Leaving Office: Date Left ____/____/____
(Check one)☐ The period covered is January 1, 2017, through the date of leaving office.

-or-

☐ The period covered is ____/____/____, through the date of leaving office.☐ Assuming Office: Date assumed ____/____/____☐ Candidate: Date of Election _____ and office sought, if different than Part 1: _____

4. Schedule Summary (must complete) ► Total number of pages including this cover page: _____

Schedules attached

☐ Schedule A-1 - Investments - schedule attached☐ Schedule C - Income, Loans, & Business Positions - schedule attached☐ Schedule A-2 - Investments - schedule attached☐ Schedule D - Income - Gifts - schedule attached☐ Schedule B - Real Property - schedule attached☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☒ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS

STREET

CITY

STATE

ZIP CODE

(Business or Agency Address Recommended - Public Document)

195 S. Broadway ST

Orcutt

CA

93455

DAYTIME TELEPHONE NUMBER

(805) 937-7246

E-MAIL ADDRESS

Bryan.Norman@Conservation.CA.gov

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed

2/23/18

(month, day, year)

Signature

Bryan Norman

(file the originally signed statement with your filing official.)